London Borough of Hammersmith & Fulham



Health & Wellbeing Board Minutes

Monday 23 March 2015

PRESENT

Committee members: Councillors Vivienne Lukey (Chair) Liz Bruce, Executive Director of Adult Social Care Janet Cree, Managing Director, H&F CCG Stuart Lines, Deputy Director of Public Health Keith Mallinson, Healthwatch Representative Dr Susan McGoldrick, H&F CCG Rachel Wright-Turner, Director for Commissioning

Other Councillors: Rory Vaughan

NHS North West London: Dr Beverley McDonald (GP and Mental Health Lead) and Thirza Sawtell (Director of Strategy and Transformation Team)

NHS England (London Region): Jo Murfitt (Head of Public Health, Health in the Justice System and Military Health)

Officers: Sue Perrin (Committee co-ordinator)

51. MINUTES AND ACTIONS

The minutes of the meeting held on 19 January 2015 were approved as an accurate record of the meeting and signed by the Chair.

52. APOLOGIES FOR ABSENCE

Apologies were received from Councillors Sue Macmillan and Sharon Holder, Dr Tim Spicer, Andrew Christie and Trish Pashley.

53. DECLARATIONS OF INTEREST

Declarations of interest were received from Councillor Vivienne Lukey as a trustee of H&F Mind and Keith Mallinson as an advisor for H&F Mind.

54. <u>NORTH WEST LONDON WHOLE SYSTEMS MENTAL HEALTH &</u> <u>WELLBEING STRATEGIC PLAN: BRIEFING PAPER</u>

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

Dr Beverley McDonald and Thirza Sawtell introduced the North West London Whole Systems Mental Health & Wellbeing Strategic Plan, which encompassed all population groups, including children and young adults. The strategic plan looked at services in a more holistic way, supporting people to maintain mental health.

The report set out the strategic context, the vison for mental health services and the objectives and expected benefits.

Dr McDonald noted the essential role of local authorities in commissioning health and wellbeing services and the importance of their commitment and involvement in the programme.

Dr McDonald emphasised the importance of 'shifting settings of care' and good joint working, with all local stakeholders.

Mr Mallinson queried whether learning disabilities had been encapsulated within the mental health strategy. Dr McDonald responded that learning disabilities would be one of a number of strands within the whole work programme, concentrating on how the needs of the group could be best met.

Mr Mallinson stated that Healthwatch would be happy to support the programme and represent the interests of patients.

Dr McDonald responded to comments about the involvement of local authorities, that they sat on the North West London Transformation Board. Mrs Bruce commented that the Board had a lack of locality focus and there tended to be limited local authority attendance through lack of capacity. There was a need for local authorities to be represented at all levels.

Mrs Wright-Turner commented that the Children's Trust Board considered the CAMHs service to be a key priority and would be keen to influence the programme outcomes.

Councillor Lukey referred to the aspirations of 'Shifting settings of care' and noted the lack of a recovery house locally to meet mid-stage needs. In addition, facilities did not meet the aspirations of women who did not want to be in mixed communities and it appeared that the carers of people with mental health problems had not been given prominence. Dr McDonald responded that there had been engagement with service users and carers and this would continue. It was recognised that carers of people with mental health problems were at risk because they were in stressful situations.

Councillor Vaughan considered that the Council would expect to be formally consulted.

Mr Mallinson stated that Healthwatch had three areas of concern with West London Mental Health Trust (WLMHT): the quality of services for patients in the Claybrook Centre; the transfer of services from Hammersmith & Fulham to Ealing; and the apparent reluctance of the trust to participate in wider patient engagement.

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

Dr McGoldrick stated that the CCG shared the concerns in respect of Claybrook Centre and potential risk. It was believed that WLMHT was aware of the issues and was reviewing its strategies.

Mrs Bruce noted the concerns in respect of Approved Mental Health Professionals leaving because of the workload and environment.

Mrs Bruce referred to the 'Shifting settings of care' and the role of the joint commissioning board. The Local Authority was the lead in respect of the learning disabilities service. Some of the pressures on providers in respect of the shift from secondary to primary care were understandable. There needed to be a locality focus. Should there be a change to or removal of a service, the Council would expect to be consulted and would like to work closely with health services in respect of the pathway and supporting people early, in a preventative way.

Mr Lines noted the importance of the relationship between physical and mental health, and supporting people to maintain physical health through a holistic approach, particularly for people with long term conditions.

Councillor Lukey concluded the discussion, stating that it had been helpful to receive the strategic plan at an early stage and that the Council would want to be involved at various levels. It was suggested that NHS North West London should work with the Health, Adult Social Care & Social Inclusion PAC to consider how to take forward the strategic plan.

RESOLVED THAT:

The Health & Wellbeing Board noted the North West London Whole Systems Mental Health & Wellbeing Strategic Plan.

55. PHARMACEUTICAL NEEDS ASSESSMENT

The Board received the Pharmaceutical Needs Assessment (PNA) 2015-2018.

Mr Lines stated that the responsibility for producing and managing the update of PNAs had transferred from Primary Care Trusts to HWBs on 1 April 2013. Local Authorities have a statutory duty to publish a fully revised PNA by 1 April 2015.

PNAs are a statement of the need for pharmaceutical services of the population in a defined geographical area. They are used in the main by NHSE as a market entry tool. There had been statutory consultation and it was believed that all comments and concerns raised by the respondents had been addressed. The PNA would be updated in three years' time.

Having assessed the local needs and the current provision of necessary services, there had not been any necessary pharmaceutical services identified, which were not provided within Hammersmith & Fulham.

The PNA could be used as a springboard for a wider review of capacity and capability of community pharmacies in Hammersmith & Fulham. In addition, they could be used in more strategic ways, for example by achieving accreditation as a Healthy Living Pharmacy, and providing sign posting and information.

Councillor Lukey commented on the lack of information in respect of immunisation (flu vaccinations were mentioned briefly). Ms Murfitt responded that commissioning through pharmacies had to be evaluated in terms of value for money, as well as access.

Councillor Vaughan commented on the importance of information in respect of pharmacy availability, opening times and services and this needed to be communicated better, for example on the Council website. Councillor Vaughan queried whether pharmacies provided the flu vaccination for children. Ms Murfitt responded that pharmacies were not licensed for the flu vaccination for children. This had to be administered by a health professional.

Mr Mallinson referred to the private provision of sexual health services by pharmacies, and queried whether there were any proposals to commission these services. Mr Lines responded that it was not planned to use pharmacies as a source of primary care in the community, as an alternative to GPs, but rather as an addition to improve access for health advice. Dr McGoldrick added that, in respect of chronic disease management whilst it was possible for pharmacists to identify these conditions, it was not possible for GPs to commission this service.

Councillor Lukey considered that there should be a dialogue with local pharmacies in respect of utilisation of their services in a more effective way. Mr Lines responded that Public Health could help with the role of a community pharmacy and accreditation as a Healthy Living Pharmacy, in addition to looking at the work streams within the PNA.

RESOLVED THAT:

The Health & Wellbeing Board approved the PNA for the London Borough of Hammersmith & Fulham.

56. <u>HAMMERSMITH & FULHAM CLINICAL COMMISSIONING GROUP:</u> LOCAL PRIORITY 2015/16: UPDATE AND NEXT STEPS

The Board received Hammersmith & Fulham CCG's 'Local Priority 2015/2016: Update and Next Steps'. Dr McGoldrick stated the CCG was awaiting further guidance from NHS England on the number of local priorities

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.

to select and the timetable. Ms Murfitt undertook to find out when the guidance would be available.

Initial information from the consultation on the short list indicated the following two priorities: Childhood Immunisation – MMR2 and Identification of Young Carers, followed by Tackling childhood obesity – signposting to weight management services and diabetes.

Mr Mallinson noted that there was evidence of the success of expert patient support in respect of diabetes.

Councillor Vaughan queried the meaning of 'priority'. Dr McGoldrick responded that a financial bonus was received from NHS England in respect of achievement of targets in the two priority areas. Whilst this impacted on the CCG's focus, the other areas remained priorities.

Mr Lines suggested that Public Health would be keen to assist in helping to develop an objective prioritisation process in order to assist in selecting from the long list, providing analysis and quantifying outcomes.

Councillor Lukey noted that the local priorities were a work in progress. Whilst the priorities of the CCG were not necessarily identical to those of the HWB, there needed to be some core synergies.

RESOLVED THAT:

The Health & Wellbeing Board noted the Local Priority 2015/2016: Update and Next Steps.

57. WORK PROGRAMME

The work programme for 2015/2016 was approved subject to the addition of the development of commissioning intentions to the June agenda and Community Independence Service, a joined up approach to the work programme.

58. DATE OF NEXT MEETING

This was the last meeting of the municipal year.

Meeting started: 6.00 pm Meeting ended: 7.00 pm

Chairman

Contact officer: Sue Perrin Committee Co-ordinator Governance and Scrutiny 2: 020 8753 2094 E-mail: sue.perrin@lbhf.gov.uk

Minutes are subject to confirmation at the next meeting as a correct record of the proceedings and any amendments arising will be recorded in the minutes of that subsequent meeting.